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CONFIRMATION NO. 3546

<b>SERIAL NUMBER</b> 10/823,017	<b>FILING OR 371(c) DATE</b> 04/12/2004 <b>RULE</b>	<b>CLASS</b> 600	<b>GROUP ART UNIT</b> 3735	<b>ATTORNEY DOCKET NO.</b> 022274-000200US
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**APPLICANTS**

Milton A. Fuller, Reno, NV;

**\*\* CONTINUING DATA \*\*\*\*\***

This application is a CON of 10/169,278 06/24/2002 PAT 6,723,048 which is a 371 of PCT/US00/35554 12/28/2000

which claims benefit of 60/173,240 12/28/1999  
and claims benefit of 60/234,002 09/20/2000

yes NW 2/9/07

**\*\* FOREIGN APPLICATIONS \*\*\*\*\*****IF REQUIRED, FOREIGN FILING LICENSE GRANTED\*\* SMALL ENTITY \*\***  
\*\* 06/24/2004

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input checked="" type="checkbox"/> no	<b>STATE OR COUNTRY</b> NV	<b>SHEETS DRAWING</b> 4	<b>TOTAL CLAIMS</b> 20	<b>INDEPENDENT CLAIMS</b> 2
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged <i>aw [signature]</i> Examiner's Signature Initials				

**ADDRESS**  
20350**TITLE**

Method and apparatus for non-invasive analysis of blood glucose

<b>FILING FEE RECEIVED</b> 385	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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